

# COCALICO GIRLS YOUTH LACROSSE BOOSTERS

## Waiver of Liability

**I, by my signature below, as parent or legal guardian of a player, acknowledge, agree, and understand that:**

1. I understand that there are certain risks and hazards involved in participating in sports that may result in injury to my child or other players, including, but not limited to those hazards associated with weather conditions, playing conditions, equipment and other participants.
2. I understand that the very nature of the game is hazardous and risky, including, but not limited to, the acts of throwing, catching and shooting of the ball, running, jumping, stretching, sliding, diving, and collisions with other players and with stationary objects, all of which can cause serious injury to my child and to other players.

**Further, I, by my signature below, as a parent or legal guardian of a player, agree that in consideration for the right to play as a member of the team and in consideration for permission to play on the fields arranged for by the team or league:**

1. I voluntarily elect to accept and assume all risks of injury incurred or suffered by my child
  - a. While practicing or playing as a member of a Cocalico Girls Youth Lacrosse Boosters team or as a participant in a Cocalico Girls Youth Lacrosse Boosters-sponsored sports camp or clinic.
  - b. While serving in a non-playing capacity as a team member during practice or play by other teams or by other players on my team; and
  - c. While on or upon the premises of any and all of the fields arranged for by my team or league for practice or play.
2. I release, discharge and agree not to sue the team and league designated, the field owners or other entity designated, or their owners, officers, agents, servants, associations, employees, or any person or entity connected with the team, league or field for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by my child from whatever cause.
3. I hereby give my consent to the team and league designated and the host organization of any sanctioned event to provide, through a medical staff of its choice, customary medical/athletic training attention, transportation and emergency medical services as warranted in the course of my child's participation in sanctioned events.
4. In addition, I hereby authorize Cocalico Girls Youth Lacrosse Boosters to utilize any and all photographs, pictures, videos, or other likeness of the participants as they deem appropriate on its website and promotional material.

**Player Name:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_